

Division of Corporations

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P00000112758

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To: Division of Corporations
Fax Number : (850) 205-0380

From: Account Name : FIELDSTONE LESTER SHEAR & DENBERG
Account Number : I19990000180
Phone : (305) 357-5775
Fax Number : (305) 357-5776

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DIVISION OF CORPORATIONS

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REGISTERED AGENT CHANGE

UNIFINA CORPORATION

Certificate of Status	0
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Page Count	01
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RA Change

7-6-01

DC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Unifins Corporation

2. The mailing address of the corporation: * 16420 Collins Avenue, Miami Beach, Florida 33160 *

NOTE NEW ADDRESS.

3. Date of incorporation/qualification: December 4, 2000 Document number: F00000112758

4. The name and address of the current registered agent and office:

Schenk, Maximilian J

3048 Orange Street

Miami, Florida 33133

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):

(P. O. Box Not Acceptable)

Ronald R. Fieldstone

201 Alhambra Circle, Suite 601

Coral Gables, Florida 33134

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

ROLF ERB
(Signature of an officer, chairman or vice chairman of the board)

6-12-01
(Date)

ROLF ERB, President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

[Signature]
(Signature of Registered Agent)

6/12/01
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314

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